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| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Benjamin First name K. Middle name | Tabitha First name N. Middle name |
| | Bring your picture identification to your meeting with the trustee. | Newman Last name and Suffix (Sr., Jr., II, III) | Newman Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7353 | xxx-xx-8744 |

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Debtor 1 Benjamin K. Newman
Debtor 2 Tabitha N. Newman

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ■ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 5347 Lansbury Circle | If Debtor 2 lives at a different address: | | | |
| | | Lake in the Hills, IL 60156 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | McHenry | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |

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Page 3 of 51 Document Debtor 1 Benjamin K. Newman Debtor 2 Tabitha N. Newman Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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| Deb | otor 2 Tabitha N. Newma | an | | | Case number (if known) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------|
| | | | | | |
| Par | t 3: Report About Any Bu | ısinesses | You Owr | as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | e |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent be operations, cash-flow statement, and federal income tax return or if any of these documents do not in 11 U.S.C. 1116(1)(B). | | | a small business debtor, you must attach your most recent balance sheet, statement of | | |
| | For a definition of small | ■ No. | I am ı | not filing under Char | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat | □ Yes. | | | |
| | of imminent and identifiable hazard to | □ res. | What is | the hazard? | |
| | public health or safety? | | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code |
| | | | | | Turnest, Street, Sity, State & Zip Sout |

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Debtor 1 Benjamin K. Newman

Tabitha N. Newman

Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-82350 Doc 1 Filed 10/06/17 Entered 10/06/17 22:22:46 Desc Main Document Page 6 of 51

| | tor 1 Benjamin K. New Tabitha N. New | | | | Case numbe | r (if known) | | |
|--------------------------------------------------------------|-----------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|--|
| Part | 6: Answer These Que | estions for R | Reporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you o | owe that are not consur | mer debts or busines | s debts | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter | r 7. Go to line 18. | | | | |
| Do you estimate that after any exempt property is excluded a | | | are paid that funds will be av | | | erty is excluded and administrative expenses | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | |
| | be available for distribution to unsecur creditors? | ed | Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 | | <u> </u> | | <u> </u> | | |
| | | ☐ 50-99 | | □ 5001-10,000 □ 10,001-25,0 | | ☐ 50,001-100,000 ☐ More than100,000 | | |
| | | ☐ 100-1 ☐ 200-9 | | □ 10,001-25,0 | 00 | □ iviore triarrioo,000 | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$ | ' ' | <u></u> \$1,000,001 | | □ \$500,000,001 - \$1 billion | | |
| | be worth? | ப \$30,0 | 001 - \$100,000 | □ \$10,000,001 □ \$50,000,001 | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | |
| | | | ,001 - \$500,000 ,001 - \$1 million | | 01 - \$500 million | ☐ More than \$50 billion | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | | \$1,000,001 | | □ \$500,000,001 - \$1 billion | | |
| | to be? | ப \$50, | 001 - \$100,000 | □ \$10,000,001 | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | |
| | | | ,001 - \$500,000 ,001 - \$1 million | | ☐ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | |
| | you | I have ex | xamined this petition, and I de | clare under penalty of p | perjury that the inforn | nation provided is true and correct. | | |
| | | | | | | under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7. | | |
| | | | orney represents me and I did nt, I have obtained and read th | | | t an attorney to help me fill out this | | |
| | | I reques | st relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankrup and 357 | stand making a false statement, concealing property, or obtaining money or property by fraud in connection with a otcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 11. | | | | | |
| | | | jamin K. Newman | | /s/ Tabitha N. Ne | | | |
| | | | nin K. Newman re of Debtor 1 | | Tabitha N. Newr Signature of Debtor | | | |
| | | Execute | d on October 6, 2017 | | Executed on Oct | | | |
| | | | MM / DD / YYYY | | MM | / DD / YYYY | | |

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| Debtor 1 | Benjamin K. Newn | | Page / 0151 | | |
|----------|---------------------|------------------------------------------------|------------------------------------------------------|---------------------------------|--|
| | Tabitha N. Newma | | Case number (if known) | | |
| | | | | | |
| | | | | | |
| For your | attorney if you are | I the attorney for the debtor(s) named in this | s petition, declare that I have informed the debtor(| s) about eligibility to proceed | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Timothy Brown | Date | October 6, 2017 |
|----------------------------------------|---------------|----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Timothy Brown | | |
| Printed name | | |
| Law Office of Timothy Brown | | |
| Firm name | | |
| 1520 Carlemont Drive, Suite M | | |
| Crystal Lake, IL 60014 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 815-455-9529 | Email address | tbrown@tbrownlaw.com |
| 6281666 | | |
| Bar number & State | | |

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| | | Docume | ent Page 8 of 51 | |
|---------------------|--------------------------|-------------------|------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Benjamin K. New | man | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tabitha N. Newm | an | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 195,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 110,499.71 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 305,499.71 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 178,664.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 48,484.20 |
| | Your total liabilities | \$ | 227,148.20 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,047.59 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,030.20 |
| Paı | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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|----------|--------------------|----------|------------------------|--|
| | Benjamin K. Newman | | 9 | |
| Debtor 2 | Tabitha N. Newman | | Case number (if known) | |

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,915.58

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|------------------------------------------------------------------------------------------------------------------------------|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 19,891.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 19,891.00 |

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| in this information to | identify | your case and t | | | | | | |
| | | | le Name | | Last Name | | | |
| | | lewman | | | Last Name | | | |
| ed States Bankruptcy | Court for | the: NORTHER | RN DIST | RICT OF ILLIN | IOIS | | | |
| e number | | | | | - | | | ☐ Check if this is an amended filing |
| _ | | _ | | | | | | 12/15 |
| it fits best. Be as comp nation. If more space is er every question. | lete and needed, | accurate as possib attach a separate s | le. If two sheet to ti | married people nis form. On the | eare filing together, both are top of any additional pages | equally responsi | ible for su | pplying correct |
| | rty? | | | | | | | |
| 50.47 L b O' | | | What | is the property | ? Check all that apply | | | |
| | | scription | . = | Duplex or mult | i-unit building | the amount of a | ny secured | d claims on Schedule D: |
| Lake in the Hills | IL State | 60156-0000 ZIP Code | | Land | | entire property | r? | Current value of the portion you own? \$195,000.00 |
| | | | _ | | in the property? Check one | (such as fee si a life estate), if | mple, tena known. | ancy by the entireties, or |
| McHenry | | | | Debtor 2 only | | | | |
| County | | | | Debtor 1 and I | Debtor 2 only the debtors and another | ☐ Check if the contraction of t | | munity property |
| | in this information to other 1 Benja First Na Tabit First Na Ted States Bankruptcy of the number Ficial Form 10 Chedule A/E C | in this information to identify ator 1 Benjamin K First Name Tabitha N. N First Name ed States Bankruptcy Court for the enumber Ficial Form 106A/E Chedule A/B: P Chedu | In this information to identify your case and to stor 1 Benjamin K. Newman First Name Midd Tabitha N. Newman First Name Midd Red States Bankruptcy Court for the: NORTHEF The number Midd Morther Morther Morther Morther Morther Morther Morther Midd Morther Morther Morther Midd Morther Morther Morther Morther Midd Morther Morther Morther Morther Midd Morther Morther Morther Midd Morther Morther Morther Midd Morther Morther Midd Morther Morther Morther Midd Morther Morther Morther Midd Morther Morther Midd Morther Midd Morther Midd Morther Midd Morther Midd Morther Midd Morther Morther Midd Morther Midd Morther Midd Morther Midd Morther Morther Midd Morther Mo | in this information to identify your case and this filing for 1 Benjamin K. Newman | In this information to identify your case and this filing: Inter 1 Benjamin K. Newman First Name Middle Name Tabitha N. Newman First Name Middle Name Tabitha N. Newman First Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name MortHERN DISTRICT OF ILLIN It is best. Be as complete and accurate as possible. If two married people mation. If more space is needed, attach a separate sheet to this form. On the rer every question. It Describe Each Residence, Building, Land, or Other Real Estate You Own O you own or have any legal or equitable interest in any residence, building, No. Go to Part 2. Yes. Where is the property? Single-family in Duplex or mult Condominium Manufactured Lake in the Hills IL 60156-0000 City State ZIP Code Middle Name Middle Nam | In this information to identify your case and this filling: Senjamin K. Newman | In this information to identify your case and this filling: Control Benjamin K. Newman First Name Middle Name Last Name Last Name | In this information to identify your case and this filing: Continue |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$195,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| ractors, sport utility e ey ge: 23,000 ha b XU 750 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$10,600.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clair | ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$10,600.0 |
|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ey ge: 23,000 ha o XU 750 | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$10,600.00 Do not deduct secured clair the amount of any secure | ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$10,600.0 |
| ey ge: 23,000 ha o XU 750 | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$10,600.00 Do not deduct secured clair the amount of any secure | ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$10,600.0 |
| ey ge: 23,000 ha o XU 750 | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$10,600.00 Do not deduct secured clair the amount of any secure | cd claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$10,600.0 |
| ey ge: 23,000 ha o XU 750 | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$10,600.00 Do not deduct secured clair the amount of any secure | cd claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$10,600.0 |
| ge: 23,000 ha b XU 750 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$10,600.00 Do not deduct secured clause amount of any secure | Current value of the portion you own? |
| ha o XU 750 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | \$10,600.00 Do not deduct secured clause amount of any secure | \$10,600.0 |
| ha o XU 750 | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | \$10,600.00 Do not deduct secured club, the amount of any secure | \$10,600.0 |
| XU 750 | Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | Do not deduct secured clause amount of any secure | |
| XU 750 | (see instructions) Who has an interest in the property? Check one Debtor 1 only | Do not deduct secured clause amount of any secure | |
| XU 750 | Debtor 1 only | the amount of any secure | aims or exemptions. Put |
| | Debtor 1 only | | |
| | <u> </u> | Ciedilois vviio dave Clai | ed claims on <i>Schedule D.</i> Ims Secured by Property. |
| je: | I I Debtor 2 only | | |
| 1 0. | ■ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | At least one of the debtors and another | ontino proporty . | portion you own. |
| | The least one of the debiors and another | | |
| | ☐ Check if this is community property | \$1,000.00 | \$1,000.0 |
| ached for Part 2. Wr | ite that number here | | \$11,600.00 |
| | e interest in any of the following items? | | Current value of the |
| _ | | j | portion you own? Do not deduct secured |
| nd furnishings | ens, china, kitchenware | j | portion you own? Do not deduct secure |
| n d furnishings bliances, furniture, lin | | j | portion you own? Do not deduct secured claims or exemptions. |
| nd furnishings | | j | portion you own? Do not deduct secured |
| n d furnishings bliances, furniture, lin | rnishings | j | portion you own? Do not deduct secured claims or exemptions. |
| nd furnishings bliances, furniture, lin Furniture/ fu | rnishings nces | j | portion you own? Do not deduct secured claims or exemptions. |
| | ers, motors, persona e of the portion you ached for Part 2. Wr | motor homes, ATVs and other recreational vehicles, other vehicles, an ers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle at e of the portion you own for all of your entries from Part 2, including an ached for Part 2. Write that number here | motor homes, ATVs and other recreational vehicles, other vehicles, and accessories ers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories e of the portion you own for all of your entries from Part 2, including any entries for ached for Part 2. Write that number here |

Official Form 106A/B

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| Debtor 1 Debtor 2 | Tabitha N. N | | Case number | (if known) |
|------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------|
| ■ Yes. | Describe | | | |
| | | Television | | \$20.00 |
| | | | | |
| | | Tablets (2) | | \$20.00 |
| | | Phones | | \$100.00 |
| | | Storoo | | \$25.00 |
| | | Stereo | | Ψ23.00 |
| Examp ■ No | | I figurines; paintings, prints, or other artwork; book ons, memorabilia, collectibles | s, pictures, or other art objects; sta | amp, coin, or baseball card collections; |
| Examp | nent for sports a vles: Sports, photo musical instr | ographic, exercise, and other hobby equipment; bid | cycles, pool tables, golf clubs, skis | ; canoes and kayaks; carpentry tools; |
| ■ res. | . Describe | I | | 1 |
| | | Treadmill | | \$50.00 |
| ■ No □ Yes. 11. Clother Exam □ No | ples: Pistols, rifle Describe | s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, a | ccessories | |
| | | Clothing | | \$100.00 |
| ☐ No | | welry, costume jewelry, engagement rings, weddir Jewelry | ng rings, heirloom jewelry, watches | s, gems, gold, silver |
| Exam □ No | arm animals ples: Dogs, cats, Describe | birds, horses | | |
| | | Dog | | \$5.00 |
| | _ | | | |
| 14. Any of | ther personal an | d household items you did not already list, inc | luding any health aids you did r | ot list |

☐ No

■ Yes. Give specific information.....

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| Debtor 2 | Tabitha N. Newman | Case number (if known) | |
|-------------------|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| | Lawnmower and tools | | \$100.00 |
| | Swingset and trampoling | ne | \$70.00 |
| | Hot tub | | \$4,500.00 |
| | he dollar value of all of your entries from Pa art 3. Write that number here | art 3, including any entries for pages you have attached | \$5,850.00 |
| Part 4: De | scribe Your Financial Assets | | |
| Do you ov | vn or have any legal or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | oles: Money you have in your wallet, in your hor | me, in a safe deposit box, and on hand when you file your petit | tion |
| Exam _p | institutions. If you have multiple accounts | unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each. Institution name: | houses, and other similar |
| ■ Yes | | mondion name. | |
| | 17.1. Checking | Chase | \$0.00 |
| | , mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with bro | kerage firms, money market accounts | |
| ■ No | Institution or issuer o | oome: | |
| ⊔ Yes | Institution or issuer n | iame. | |
| | ublicly traded stock and interests in incorpo enture | rated and unincorporated businesses, including an intere | st in an LLC, partnership, and |
| | Give specific information about them | % of ownership: | |
| Negoti Non-n | | tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. hisfer to someone by signing or delivering them. | |
| ■ No □ Yes. | Give specific information about them Issuer name: | | |
| | nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 40 | 03(b), thrift savings accounts, or other pension or profit-sharing | ŋ plans |
| ■ Yes. | List each account separately. Type of account: | Institution name: | |
| | 401(k) | Fidelity | \$91,759.29 |
| | Retirement stock plan | Fidelity | \$1,290.42 |

Case 17-82350 Doc 1 Filed 10/06/17 Entered 10/06/17 22:22:46 Desc Main Page 14 of 51 Document Benjamin K. Newman Debtor 1 Debtor 2 Tabitha N. Newman Case number (if known) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

value:

Term life insurance policy

Spouse

\$0.00

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|----------------------|----------------------------------------------------------------------|----------------|-----------------------------|----------------------------------------------------|--------------------------|
| Debtor 1 Debtor 2 | | 1 | Boodinone | Case number (if kno | wn) |
| If you | eone has died. | | | ed surance policy, or are currently entitled to | receive property because |
| Exa ■ No | mples: Accidents, employmen | | | it or made a demand for payment s to sue | |
| ■ No | • | ed claims of | every nature, including | g counterclaims of the debtor and right | s to set off claims |
| ■ No | financial assets you did not so | already list | | | |
| for | Part 4. Write that number he | ere | | ny entries for pages you have attached | \$93,049.71 |
| Part 5: | Describe Any Business-Related | Property You | Own or Have an Interest I | In. List any real estate in Part 1. | |
| | u own or have any legal or equi | table interest | in any business-related p | roperty? | |
| _ | Go to Part 6 Go to line 38. | | | | |
| | Describe Any Farm- and Comme If you own or have an interest in fa | | | n or Have an Interest In. | |
| 46. Do y | ou own or have any legal or | equitable in | nterest in any farm- or o | commercial fishing-related property? | |
| I | lo. Go to Part 7. | | | | |
| | es. Go to line 47. | | | | |
| Part 7: | Describe All Property You | Own or Have a | an Interest in That You Dic | l Not List Above | |
| Exa ■ No | | y club membe | | | |
| ⊔ Ye | s. Give specific information | | | | |

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54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Benjamin K. Newman Debtor 1 Debtor 2 Tabitha N. Newman Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$195,000.00 56. Part 2: Total vehicles, line 5 \$11,600.00 Part 3: Total personal and household items, line 15 57. \$5,850.00 Part 4: Total financial assets, line 36 58. \$93,049.71 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$110,499.71 \$110,499.71 63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 7

\$305,499.71

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| | | 1700.11111. | III FAUE 17 ULJI | | |
|---------------------|--------------------------|-------------------|------------------|-----------------------|--|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Benjamin K. New | man | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Tabitha N. Newm | an | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is an | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption |
|-------------------------------------------------------------------------------------|--------------------------------------|------|-----------------------------------------------------------------|------------------------------------|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | |
| 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County | \$195,000.00 | | \$30,000.00 | 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2014 Dodge Journey 23,000 miles | \$10,600.00 | | \$4,800.00 | 735 ILCS 5/12-1001(c) |
| Line Holli Schedule AVB. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2014 Dodge Journey 23,000 miles | \$10,600.00 | | \$5,800.00 | 735 ILCS 5/12-1001(b) |
| Ellio II Goriodale 772. | | | 100% of fair market value, up to any applicable statutory limit | |
| 1983 Yamaha Virago XU 750 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Elite from Genedale 24 B. G.E | | | 100% of fair market value, up to any applicable statutory limit | |
| Furniture/ furnishings Line from Schedule A/B: 6.1 | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| LINE HOLL SCHEUUIE PAB. U.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Benjamin K. Newman Debtor 1 Debtor 2 Tabitha N. Newman

Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----------------------------------------------------------------------------------------|-----------------------------------------|-----|-----------------------------------------------------------------|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Major appliances | \$250.00 | | \$250.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Small appliances Line from Schedule A/B: 6.3 | \$30.00 | | \$30.00 | 735 ILCS 5/12-1001(b) |
| Line Horr Schedule Avb. 9.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| Kitchen items Line from Schedule A/B: 6.4 | \$60.00 | | \$60.00 | 735 ILCS 5/12-1001(b) |
| and noin conseque, v.z. cr | | | 100% of fair market value, up to any applicable statutory limit | |
| Felevision ine from Schedule A/B: 7.1 | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Fablets (2) ine from Schedule A/B: 7.2 | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Phones ine from Schedule A/B: 7.3 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| and norm deflectable /v.b. 110 | | | 100% of fair market value, up to any applicable statutory limit | |
| Stereo Line from Schedule A/B: 7.4 | \$25.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| and nom conedule /vb. 111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| and nom conedule /v2. Titl | | | 100% of fair market value, up to any applicable statutory limit | |
| lewelry ine from Schedule A/B: 12.1 | \$120.00 | | \$120.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Dog .ine from <i>Schedule A/B</i> : 13.1 | \$5.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| _awnmower and tools _ine from <i>Schedule A/B</i> : 14.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| and north ochequite AVD. 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Tabitha N. Newman Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Swingset and trampoline 735 ILCS 5/12-1001(b) \$70.00 \$0.00 Line from Schedule A/B: 14.2 100% of fair market value, up to any applicable statutory limit 401(k): Fidelity 735 ILCS 5/12-1006 \$91,759.29 \$91,759.29 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Retirement stock plan: Fidelity 735 ILCS 5/12-1006 \$1,000.00 \$1,290.42 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------|--------------------------|
| Fill in this informati | on to identify you | | (7 ()) | | |
| Debtor 1 | Benjamin K. Ne | wman | | | |
| <u></u> | irst Name | Middle Name Last Name | | - | |
| Debtor 2 | Tabitha N. New | man | | | |
| (Spouse if, filing) | First Name | Middle Name Last Name | | - | |
| United States Bankru | ptcy Court for the | NORTHERN DISTRICT OF ILLINOIS | | - | |
| Case number | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | led filing |
| Official Form 1 | 06D | | | | |
| | | Who Hove Claims Secure | nd by Drapart | | 40/45 |
| Schedule D | Creditors | Who Have Claims Secure | ed by Propert | у | 12/15 |
| | | If two married people are filing together, both are cout, number the entries, and attach it to this form. | | | |
| . Do any creditors hav | e claims secured b | v vour property? | | | |
| | | his form to the court with your other schedules. | Vou have nothing also t | to roport on this form | |
| _ | | • | Tou have nothing else i | to report on this form. | |
| Yes. Fill in all | of the information | below. | | | |
| Part 1: List All Se | soured Claims | | | | |
| • | ecureu Ciairiis | | Calumn A | Calumn D | Caluman |
| | ms. If a creditor has | more than one secured claim, list the creditor separate | | Column B | Column C |
| for each claim. If more | ms. If a creditor has than one creditor has | more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| for each claim. If more | ms. If a creditor has than one creditor has e claims in alphabet | s a particular claim, list the other creditors in Part 2. As | ely S Amount of claim | Value of collateral | Unsecured portion |
| for each claim. If more much as possible, list th | ms. If a creditor has than one creditor has e claims in alphabet | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| for each claim. If more much as possible, list the claim. 2.1 Franklin Ame Creditor's Name 501 Corporation | ms. If a creditor has than one creditor has the claims in alphabet erican Mtg/ | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| for each claim. If more much as possible, list the claim. 2.1 Franklin Ame Creditor's Name 501 Corporate Franklin, TN | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the claim. 2.1 Franklin Ame Creditor's Name 501 Corporation | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| for each claim. If more much as possible, list the claim. 2.1 Franklin Ame Creditor's Name 501 Corporate Franklin, TN | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the creditor's Name Tranklin Ame Tranklin Ame Tranklin Ame Tranklin, TN Number, Street, City Who owes the debt? Debtor 1 only | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | Amount of claim Do not deduct the value of collateral. \$178,664.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the creditor's Name 501 Corporate Franklin, TN Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ te Centre Dr 37067 , State & Zip Code Check one. | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or second contents and contents and contents are contents.) | Amount of claim Do not deduct the value of collateral. \$178,664.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the creditor's Name 501 Corporate Franklin, TN Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debto | ms. If a creditor has than one creditor has te claims in alphabet erican Mtg/ te Centre Dr 37067 , State & Zip Code Check one. | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) | Amount of claim Do not deduct the value of collateral. \$178,664.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the creditor's Name 501 Corporate Franklin, TN Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only | ms. If a creditor has than one creditor has te claims in alphabet e clai | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sear loan) | Amount of claim Do not deduct the value of collateral. \$178,664.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more much as possible, list the creditor's Name Tranklin Ame | ms. If a creditor has than one creditor has than one creditor has the claims in alphabet erican Mtg/ te Centre Dr 37067 , State & Zip Code Check one. 2 only ebtors and another relates to a Opened 09/16 Last Active | s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name. Describe the property that secures the claim: 5347 Lansbury Circle Lake in the Hills, IL 60156 McHenry County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | Amount of claim Do not deduct the value of collateral. \$178,664.00 | Value of collateral that supports this claim | Unsecured portion |

\$178,664.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$178,664.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | Out | 30 11 02000 Bo | Document | Page 2 | 1 of 51 | DC50 Main |
|-------------|-------------------------------|------------------------------------|--------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Fill in | this inform | ation to identify your cas | | | | |
| Debto | or 1 | Benjamin K. Newma | n | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | | Tabitha N. Newman | | | | |
| (Spous | e if, filing) | First Name | Middle Name | Last Name | | |
| Unite | d States Ban | kruptcy Court for the: N | ORTHERN DISTRICT OF ILL | INOIS | | |
| Case | number | | | | | |
| (if know | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| ⊃ffi∂ | cial Form | 106E/E | | | | |
| | | | a Haya Unagaurad | Claima | | 12/15 |
| | | | Have Unsecured | | Part 2 for creditors with NONPRIORI | |
| eft. Att | tach the Cont and case num | | f you have no information to rep | | the Part you need, fill it out, number to not file that Part. On the top of an | |
| Part 1 | | rs have priority unsecured cl | | | | |
| | No. Go to Pa | | ainis against you! | | | |
| _ | _ | art 2. | | | | |
| ∟ Part 2 | Yes. | of Your NONPRIORITY U | Insecured Claims | | | |
| | | rs have nonpriority unsecure | | | | |
| _ | _ | | | | , dula a | |
| _ | J No. You nave | e nothing to report in this part. | Submit this form to the court with y | our otner sche | edules. | |
| | Yes. | | | | | |
| ur th | nsecured claim | , list the creditor separately for | each claim. For each claim listed, | identify what t | holds each claim. If a creditor has mype of claim it is. Do not list claims alre three nonpriority unsecured claims fill | ady included in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | A/r Cond | cepts | Last 4 digits of acco | ount number | 3684 | \$86.00 |
| | | Creditor's Name | | 10 | 0 | |
| | | undee Rd on, IL 60010 | When was the debt | incurred? | Opened 8/24/12 | |
| | | eet City State Zlp Code | As of the date you f | ile, the claim i | s: Check all that apply | |
| | Who incur | red the debt? Check one. | | | | |
| | Debtor 1 | 1 only | ☐ Contingent | | | |
| | Debtor 2 | 2 only | ☐ Unliquidated | | | |
| | Debtor 1 | 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least | one of the debtors and anothe | Type of NONPRIOR | TY unsecured | d claim: | |
| | ☐ Check i | f this claim is for a commun | ity Student loans | | | |
| | debt | n subject to offeet? | Ŭ, | | ration agreement or divorce that you di | d not |
| | _ | n subject to offset? | report as priority clain | | g plans, and other similar debts | |
| | ■ No | | · | • | • • | |
| | ☐ Yes | | Other. Specify | anesthesia | Assoc Crystal Val | |
| | | | | | | |

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| Debt | or 2 Tabitha N. Newman | | Case number (if know) | |
|------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------|-------------|
| 4.2 | American Medical Collection Agency | Last 4 digits of account number | 2321 | \$232.54 |
| | Nonpriority Creditor's Name 4 Westchester Plaza, Suite 110 Elmsford, NY 10523 | When was the debt incurred? | 01/2017 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Health care | <u> </u> | |
| 4.3 | Amex | Last 4 digits of account number | 4853 | \$10,296.00 |
| | Nonpriority Creditor's Name Correspondence Po Box 981540 | When was the debt incurred? | Opened 08/04 Last Active 9/25/17 | |
| | El Paso, TX 79998 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.4 | Chase Nonpriority Creditor's Name | Last 4 digits of account number | | \$800.00 |
| | PO Box 15298 Wilmington, DE 19850 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | Other. Specify Overdraft for | = : | |
| | | | | |

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| | 1 Benjamin K. Newman 2 Tabitha N. Newman | | Case number (if know) | |
|-----|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------|------------|
| 4.5 | Citibank/The Home Depot | Last 4 digits of account number | 4009 | \$2,473.00 |
| | Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129 | When was the debt incurred? | Opened 06/15 Last Active 7/22/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc | | |
| 4.6 | Citicards Cbna | Last 4 digits of account number | 4778 | \$783.00 |
| | Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179 | When was the debt incurred? | Opened 03/17 Last Active 7/07/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | Jalaim. | |
| | At least one of the debtors and another | Student loans | i Claiiii. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.7 | Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0314 | \$7,964.00 |
| | Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18773 | When was the debt incurred? | Opened 03/07 Last Active 9/30/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ■ Student loans □ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | · | |
| | ■ No | ☐ Debts to pension or profit-sharin | g pians, and other similar debts | |
| | Yes | ☐ Other. Specify | | |
| | | Euucationa | II | |

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| Debtor 2 | Benjamin K. Newman Tabitha N. Newman | | Case number (if know) | |
|----------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|-----------------|
| 4.8 | Navient | Last 4 digits of account number | 0314 | \$4,927.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18773 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | Opened 03/07 Last Active 9/30/17 | |
| | Who incurred the debt? Check one. | 7.5 0. 1.10 uuto youo, 1.10 o.u | 5. G. 166 t. a d. a. | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim | |
| | At least one of the debtors and another | Student loans | a Claim. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | g plane, and outer similar dobte | |
| | Li res | Educationa | | |
| | | | | A 242 22 |
| | Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1228 | \$3,649.00 |
| | Attn: Bankruptcy Po Box 9500 | When was the debt incurred? | Opened 12/07 Last Active 9/30/17 | |
| | Wilkes-Barr, PA 18773 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | • | , | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | l | |
| 0 | Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1228 | \$3,351.00 |
| | Attn: Bankruptcy Po Box 9500 | When was the debt incurred? | Opened 12/07 Last Active 9/30/17 | |
| - | Wilkes-Barr, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | l | |

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| | 1 Benjamin K. Newman 2 Tabitha N. Newman | | Case number (if know) | |
|----------|----------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------|------------|
| 4.1 1 | Stanislaus Credit Control Service, Inc. | Last 4 digits of account number | 86N1 | \$85.00 |
| | Nonpriority Creditor's Name Po Box 480 Modesto, CA 95353 | When was the debt incurred? | Opened 9/05/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Cep Americ | ea Illinois | |
| 4.1 | Synchrony Bank/Care Credit Nonpriority Creditor's Name | Last 4 digits of account number | 6422 | \$5,272.00 |
| | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 05/17 Last Active 8/18/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.1 | Synchrony Bank/Old Navy Nonpriority Creditor's Name | Last 4 digits of account number | 0493 | \$1,807.00 |
| | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 03/16 Last Active 9/15/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ■ No | | • | |
| | Yes | ■ Other. Specify Credit Card | | |

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| Debtor | 2 Tabitha | N. Newman | | Case n | number (if know) | |
|-------------------|------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------|---------------------------|
| 4.1 4 | Wffnb Ret | **** | Last 4 digits of account number | 1201 | | \$6,725.00 |
| | Po Box 94 | 498 | When was the debt incurred? | Open 9/15/ | ned 06/17 Last Active 17 | _ |
| | _ | s, NV 89193 et City State ZIp Code | As of the date you file, the claim | s: Check | call that apply | _ |
| | | the debt? Check one. | , 10 01 1110 4410 404 1110, 1110 0141111 | | t all triat apply | |
| | Debtor 1 o | nly | ☐ Contingent | | | |
| | Debtor 2 o | nly | ☐ Unliquidated | | | |
| | _ | and Debtor 2 only | Disputed | | | |
| | | ne of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if t | his claim is for a community | ☐ Student loans | | | |
| | debt | - | | ration ag | reement or divorce that you did not | |
| | _ | subject to offset? | report as priority claims | | | |
| | ■ No | | Debts to pension or profit-sharing | • | and other similar debts | |
| | ☐ Yes | | Other. Specify Charge Acc | count | | - |
| 4.1 5 | Wheaton I | _ | Last 4 digits of account number | 2404 | | \$33.66 |
| | Nonpriority Cr 2015 North Wheaton, | n Main Street | When was the debt incurred? | 06/20 | 017 | _ |
| | | t City State Zlp Code | As of the date you file, the claim | is: Check | all that apply | |
| | Who incurred | d the debt? Check one. | | | | |
| | Debtor 1 o | nly | ☐ Contingent | | | |
| | Debtor 2 o | nly | ☐ Unliquidated | | | |
| | Debtor 1 a | nd Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least on | e of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | | his claim is for a community | ☐ Student loans | | | |
| | debt Is the claim s | subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration ag | reement or divorce that you did not | |
| | No | | Debts to pension or profit-sharing | g plans, a | and other similar debts | |
| | ☐ Yes | | Other. Specify Health care | • | | _ |
| Part 3: | List Othe | rs to Be Notified About a Deb | t That You Already Listed | | | |
| is tryi have i | ng to collect fi more than one | rom you for a debt you owe to son | out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. | Parts 1 | or 2, then list the collection agend | y here. Similarly, if you |
| Part 4: | Add the | Amounts for Each Type of Uns | secured Claim | | | |
| | the amounts of of unsecured o | | ns. This information is for statistical r | eporting | purposes only. 28 U.S.C. §159. Ac | ld the amounts for each |
| | Ca | . Domostic overset obligations | | Co | Total Claim | |
| | 6a Total | . Domestic support obligations | | 6a. | \$ | <u></u> |
| cl | aims | Taura and and in all an dalida | | Ch. | | |
| from P | 'art 1 6b | | you owe the government njury while you were intoxicated | 6b. 6c. | \$ 0.00 \$ 0.00 | _ |
| | 60 | | cured claims. Write that amount here. | 6d. | \$ 0.00 | _ |
| | | - - | | | | _ |
| | 6e | e. Total Priority. Add lines 6a throu | ıgn 6d. | 6e. | \$0.00 | |
| | 64 | Student leans | | 6f | Total Claim | |
| | 6f. Total aims | Student loans | | 6f. | \$ 19,891.00 | <u></u> |
| from P | | Obligations arising out of a se | paration agreement or divorce that | 6g. | \$ 0.00 |) |

Official Form 106 E/F

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| Debtor 1 Debtor 2 | • | K. Newman I. Newman | Case r | number (if know) | | |
|----------------------|-----|------------------------------------------------------------------------------------------------------------|--------|------------------|-----------|--|
| | 6h. | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 28,593.20 | |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 48,484.20 | |

Official Form 106 E/F

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| | | DOGUITIE | III Paue zo urbi | |
|-----------------------------------------|-------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Benjamin K. New | man | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tabitha N. Newm | an | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | Chook if this is an |
| (ii kilowii) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | , | | | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | Oldio | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.5 | City | | Ciaio | 211 0000 | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | <u> </u> |

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| | | Docume | ent Page 29 d | of 51 | |
|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Benjamin K. New | man | | | |
| Debioi i | First Name | Middle Name | Last Name | | |
| Debtor 2 | Tabitha N. Newm | an | | | |
| (Spouse if, filing | | Middle Name | Last Name | | |
| I Initad Sta | ites Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Officed Sta | nes bankruptcy Court for the. | NORTHERN DIGITION | OI ILLINOIO | | |
| Case num | ber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | l Form 106H | | | | |
| | | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| No Yes 2. With Arizon No. Yes 3. In Col | hin the last 8 years, have you han, California, Idaho, Louisiana. Go to line 3. S. Did your spouse, former spouts. | u lived in a community pr , Nevada, New Mexico, Pu use, or legal equivalent live | operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor | ry? (Community property state ington, and Wisconsin.) r if your spouse is filing with | es and territories include n you. List the person shown |
| | 106D), Schedule E/F (Officia olumn 2. | I Form 106E/F), or Sched | ule G (Official Form 10 | 06G). Use Schedule D, Sche | dule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | | to whom you owe the debt |
| | , riambor, outon, ony, outo and 2 | | | Check all schedules tha | гарріў. |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| | | | | | |
| | | | | Пол | |
| 3.2 | Name | | | Schedule D, line | |
| | | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | _ | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to i | dentify your ca | ase: | | | | |
|------|----------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| Deb | otor 1 | Benjamin K. | Newman | | | | |
| | otor 2 | abitha N. N | ewman | | | | |
| Uni | ted States Bankruptcy | Court for the | NORTHERN DISTRIC | CT OF ILLINOIS | | | |
| | se number lown) | | | - | | eck if this is: An amended filing A supplement showing postpetition chapte | er |
| | fficial Form 1 | | | | | 13 income as of the following date: MM / DD/ YYYY 12 | |
| Be a | is complete and acciplying correct informuse. If you are separ | urate as poss nation. If you ated and you | sible. If two married pec are married and not fili r spouse is not filing w | ng jointly, and your spouse is livi ith you, do not include information | ing wit | ebtor 2), both are equally responsible for h you, include information about your ut your spouse. If more space is needed number (if known). Answer every questi | i, |
| Par | t 1: Describe E | mployment | | | | , , , | |
| 1. | Fill in your employ information. | ment | | Debtor 1 | | Debtor 2 or non-filing spouse | |
| | If you have more that attach a separate pa | ige with | Employment status | ■ Employed | | ☐ Employed | |
| | information about ac employers. | lditional | Occupation | ☐ Not employed Communications Technicia | an | ■ Not employed | |
| | Include part-time, se self-employed work. | easonal, or | Employer's name | Comcast Cable | | | |

Part 2: Give Details About Monthly Income

Occupation may include student or homemaker, if it applies.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

One Comcast Center Philadelphia, PA 19103

13 Years

Employer's address

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,915.58 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 4,915.58 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

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| Deb Deb | tor 1 tor 2 | Benjamin K. Newman Tabitha N. Newman | - | C | Case nu | umber (<i>if k</i> | nown) | | | | |
|------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----|----------|---------------------|--------------|----------|-----------------|----------------|-----------------|
| | | | | | For D | ebtor 1 | | | Debtor | | |
| | Cop | y line 4 here | 4. | - | \$ | 4,91 | 5.58 | \$ | | 0.00 | - |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 87 | 1.53 | \$ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ | | 2.87 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | | \$ | 46 | 4.90 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | (| 0.00 | \$ | | 0.00 | - |
| | 5g. | Union dues | 5g. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5h. | Other deductions. Specify: Life Insurance | _ 5h. | .+ | \$ | | 5.93 | | | 0.00 | _ |
| | | Disability Insurance | _ | | \$ | 1 | 2.76 | . \$_ | | 0.00 | - |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | , | \$ | 1,86 | 7.99 | . \$_ | | 0.00 | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 3,04 | 7.59 | \$_ | | 0.00 | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | \$ | | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | | 0.00 | \$ | | 0.00 | - |
| | 8d. | Unemployment compensation | 8d. | | \$ | (| 0.00 | \$ | | 0.00 | _ |
| | 8e. | Social Security | 8e. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | _ 8f. 8g. | | \$ \$ | (| 0.00 0.00 | \$ \$ | | 0.00 | - |
| | 8h. | Other monthly income. Specify: | _ 8h. | .+ | \$ | | 0.00 | + \$_ | | 0.00 | _ |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 5 | | 0.00 | \$_ | | 0.0 | 0 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | 3, | 047.59 | + \$ | | 0.00 | = \$ | 3,047.59 |
| 11. | Incluothe Do i | te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depe | | | | | , | Schedule 11. | | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. | \$ | 3,047.59 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Combine month! | ned y income |
| | | No. Yes. Explain: | | | | | | | | | |

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| SIII | in this informa | ition to identify yo | our case: | | | İ | | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------|--------------------------------------------------------|
| Deb | | Benjamin K. | | า | | Chec | k if this is: | |
| | | 2011,411111111 | | <u> </u> | | | An amended filing | |
| | tor 2 | Tabitha N. No | ewman | | | | | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankı | ruptcy Court for the | NORTH | HERN DISTRICT OF ILLIN | OIS | _ | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| | | | | | | | | |
| | | rm 106J | Evnor | 200 | | | | 40/4 |
| | | J: Your I | | ISES . If two married people ar | o filing together b | oth ore caus | ally recognished for | 12/1 |
| info | ormation. If manual man | | eded, atta y questio | ach another sheet to this | | | | |
| 1. | Is this a join | nt case? | | | | | | |
| | ☐ No. Go to | line 2. | | | | | | |
| | Yes. Doe | es Debtor 2 live i | n a separ | ate household? | | | | |
| | ■ N □ Y | - | st file Offici | ial Form 106J-2, <i>Expense</i> s | for Separate House | ehold of Debt | or 2. | |
| 2. | Do you hay | e dependents? | п., | | | | | |
| ۷. | • | • | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Son | | 2 | Yes |
| | | | | | _ | | _ | □ No |
| | | | | | Daughter | | 5 | Yes |
| | | | | | | | _ | □ No |
| | | | | | Daughter | | 7 | ■ Yes |
| | | | | | | | | □ No |
| 3. | | oenses include | | l _{No} | | | | ☐ Yes |
| | | f people other tl d your depende | han _— | | | | | |
| exp | imate your ex | ate Your Ongoin openses as of your a date after the b | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this followed the second | orm as a su J, check th | pplement in a Cha e box at the top o | apter 13 case to report of the form and fill in the |
| the | ude expense value of suc ficial Form 10 | h assistance and | non-cash d have ind | government assistance it cluded it on Schedule I: Y | f you know our Income | | Your exp | enses |
| ,511 | | , | | | | | | |
| 4. | | or home owners | | nses for your residence. In or lot. | nclude first mortgage | e 4. \$ | | 1,515.20 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | 4b. Prope | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 0.00 |
| | 4d Homo | owner's associat | ion or con | dominium duoc | | 2 hr | | 0.00 |

5. Additional mortgage payments for your residence, such as home equity loans

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| Debto | | | n K. Newman N. Newman | Case num | ber (if known) | |
|-------|--------|---------------|------------------------------------------------------------------------------------------------|-----------------------|----------------|----------------------------|
| 6. | Utilit | ies: | | | | |
| | 6a. | Electricity, | heat, natural gas | 6a. | \$ | 230.00 |
| | 6b. | Water, sev | wer, garbage collection | 6b. | \$ | 70.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 170.00 |
| | 6d. | Other. Spe | ecify: | 6d. | \$ | 0.00 |
| 7. | Food | | ekeeping supplies | 7. | \$ | 600.00 |
| | | | hildren's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | hing. laundi | ry, and dry cleaning | 9. | \$ | 100.00 |
| | | | products and services | 10. | \$ | 50.00 |
| | | • | ntal expenses | 11. | · : ———— | 15.00 |
| | | | Include gas, maintenance, bus or train fare. | | | 10.00 |
| | | | ar payments. | 12. | \$ | 100.00 |
| | | | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| | | | ributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insu | rance. | • | | | |
| | Do no | ot include in | surance deducted from your pay or included in lines 4 or 20 |). | | |
| | | Life insura | | 15a. | \$ | 0.00 |
| | 15b. | Health ins | urance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle ins | surance | 15c. | \$ | 130.00 |
| | 15d. | Other insu | rance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxe | s. Do not in | clude taxes deducted from your pay or included in lines 4 o | r 20. | · · | |
| | Spec | | , , , , , , , , , , , , , , , , , , , | 16. | \$ | 0.00 |
| 17. | Insta | illment or le | ease payments: | | | |
| | 17a. | Car payme | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. | Car payme | ents for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. | Other. Spe | ecify: | 17c. | \$ | 0.00 |
| | | Other. Spe | | 17d. | \$ | 0.00 |
| 18. | Your | payments | of alimony, maintenance, and support that you did not | report as | | |
| | | | your pay on line 5, Schedule I, Your Income (Official Fo | | \$ | 0.00 |
| 19. | Othe | r payments | s you make to support others who do not live with you. | • | \$ | 0.00 |
| | Spec | ify: | | 19. | • | |
| | | | erty expenses not included in lines 4 or 5 of this form o | on Schedule I: Yo | our Income. | |
| | 20a. | Mortgages | s on other property | 20a. | · · | 0.00 |
| | 20b. | Real estate | e taxes | 20b. | \$ | 0.00 |
| | 20c. | Property, h | nomeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. | Maintenan | ice, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. | Homeown | er's association or condominium dues | 20e. | \$ | 0.00 |
| 21. | Othe | r: Specify: | | 21. | +\$ | 0.00 |
| | | | | | | |
| | | - | monthly expenses | | | |
| | | Add lines 4 | • | | \$ | 3,030.20 |
| | 22b. | Copy line 22 | 2 (monthly expenses for Debtor 2), if any, from Official Form | 106J-2 | \$ | |
| | 22c. | Add line 22a | a and 22b. The result is your monthly expenses. | | \$ | 3,030.20 |
| 22 | Cala | | monthly net income. | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a. | ¢ | 2 047 50 |
| | | | | | | 3,047.59 |
| | 230. | Copy your | monthly expenses from line 22c above. | 23b. | - э | 3,030.20 |
| | 23c | Subtract w | our monthly expenses from your monthly income. | | | |
| | 230. | | is your <i>monthly net income</i> . | 23c. | \$ | 17.39 |
| | | THE TESUIT | to your monding flot intoffic. | | 1 | |
| 24. | Do y | ou expect a | an increase or decrease in your expenses within the yea | r after you file this | form? | |
| | For ex | xample, do yo | ou expect to finish paying for your car loan within the year or do you terms of your mortgage? | | | e or decrease because of a |
| | | | tomo or your mongago: | | | |
| | ■ No | | [e] | | | |
| | □ Ye | es. | Explain here: | | | |

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| Fill in this informa | ation to identify your | case: | | | | |
|----------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------|--------------------------------------------|--|--|
| Debtor 1 | Benjamin K. New | man | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Tabitha N. Newm | an | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Banl | kruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | Check if this is an amended filing | | |
| If two married peo | on About a | r, both are equally resp | I Debtor's Schedul | | | |
| years, or both. 18 | or property by fraud ii U.S.C. §§ 152, 1341, 1 Below | | nkruptcy case can result in fines up t | to \$250,000, or imprisonment for up to 20 | | |
| Did you pay | or agree to pay some | one who is NOT an atto | orney to help you fill out bankruptcy f | forms? | | |
| ■ No | | | | | | |
| ☐ Yes. Na | Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) | | | | | |
| that they are | y of perjury, I declare true and correct. amin K. Newman | that I have read the sur | mmary and schedules filed with this o | | | |
| | n K. Newman | | Tabitha N. Newman | w | | |
| | of Debtor 1 | | Signature of Debtor 2 | | | |
| Date O | | | | | | |

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| Fill in this infor | mation to identify you | r case: | | | | | | |
|--------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------|--|--|--|
| Debtor 1 | | | | | | | | |
| Debior | Benjamin K. Nev First Name | | | | | | | |
| Debtor 2 | Tabitha N. Newr | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | | | | |
| Case number (if known) | | | | _ | theck if this is an mended filing | | | |
| | of Financial | Affairs for Individ | | | 4/16 | | | |
| information. If r | | attach a separate sheet to | | equally responsible for sup y additional pages, write you | | | | |
| Part 1: Give | Details About Your Ma | arital Status and Where You | Lived Before | | | | | |
| 1. What is you | ır current marital statı | ıs? | | | | | | |
| ■ Married Not ma | - | | | | | | | |
| 2. During the | last 3 years, have you | lived anywhere other than | where you live now? | | | | | |
| □ No | | | | | | | | |
| | st all of the places you | ived in the last 3 years. Do no | ot include where you live now | <i>I</i> . | | | | |
| Debtor 1 P | rior Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| | erson Avenue Park, IL 60176 | From-To: July 2014 to March 2015 | ■ Same as Debtor | 1 | Same as Debtor 1 From-To: | | | |
| states and territo. No Yes. M | ries include Arizona, Ca | lifornia, Idaho, Louisiana, Ner hedule H: Your Codebtors (Of | vada, New Mexico, Puerto R | ity property state or territory ico, Texas, Washington and W | | | | |
| Fill in the tot | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? | | | |
| □ No ■ Yes. Fi | ll in the details. | | | | | | | |
| | | Debtor 1 | | Debtor 2 | | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | From January 1 of current year until the date you filed for bankruptcy: | | \$45,137.77 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | | |
| | | ☐ Operating a business | | ☐ Operating a business | | | | |
| Official Form 107 | | Statement of Financial Affa | airs for Individuals Filing for B | ankruptcy | page 1 | | | |

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| | btor 1 btor 2 | | - | | Newman ewman | | | | case | number (if known) | | |
|-------------------------------------------------------------|------------------|-----------------------------------|----------------------|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------|--------|----------------------------------------|-------------|-------------------------------------------------------|
| | | | | | | | | | | | | |
| | | | | | | Sources of income Check all that apply. | (be | oss income efore deductions and clusions) | t | Sources of incor Check all that app | | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2016) | | ■ Wages, commission bonuses, tips | ons, | \$50,800.00 | | ☐ Wages, commi | issions, | ssions, \$0.00 | | | | |
| | | | | | | ☐ Operating a busin | ess | | | ☐ Operating a bu | ısiness | |
| | | | | | fore that: 31, 2015) | ■ Wages, commission bonuses, tips | ons, | \$56,441.00 | 0 | ☐ Wages, commi | issions, | \$0.00 |
| | | | | | | ☐ Operating a busin | ess | | | ☐ Operating a bu | ısiness | |
| | List e | No | ource Fill in tl | | • | Debtor 1 | | | e tha | Debtor 2 | | Gross income |
| | | | Fill in tl | he de | tails. | | | | | | | |
| | | | | | | Sources of income Describe below. | ea (be | oss income from ch source efore deductions and clusions) | d | Sources of incor Describe below. | ne | Gross income (before deductions and exclusions) |
| Pa | rt 3: | List | Certai | in Pa | yments You | Made Before You File | ed for Bank | ruptcy | | | | |
| | _ | either No. | Neith individ | er Dedual p | ebtor 1 nor I orimarily for a | 's debts primarily con Debtor 2 has primarily personal, family, or ho ore you filed for bankrup | consumer usehold pur | debts. Consumer de pose." | | | | 1(8) as "incurred by ar |
| | | | | | Go to line 7 | | | | | | | |
| | | | □ _Y | | paid that cr not include | each creditor to whom y editor. Do not include p payments to an attorne t on 4/01/19 and every | ayments for y for this ba | domestic support of nkruptcy case. | bligat | tions, such as child | d support a | nd alimony. Also, do |
| | | Yes. | | | 1 or Debtor 2 or both have primarily consumer debts. the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | |
| | | | | lo. | Go to line 7 | . | | | | | | |
| | | | □ _Y | 'es | include pay | each creditor to whom yments for domestic supthis bankruptcy case. | | | | | | |
| | Cre | ditor's | s Nam | e and | l Address | Dates of p | payment | Total amount | | Amount you | Was this բ | payment for |

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| Debt Debt | | Benjamin K. Newman Fabitha N. Newman | | | Ca | = ase number (| f known) | | |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------|-------------------------------------------------|-----------------------------|-------------------|----------------------------------|---------------------------------------------------|
| ć | <i>Insiders</i> of which | 1 year before you filed for bankrup include your relatives; any general p you are an officer, director, person i ess you operate as a sole proprietor. | artner n cont | s; relatives of any ge rol, or owner of 20% | neral partners; partr or more of their votir | nerships of wing securities | hich yo and ar | u are a genera ny managing ag | I partner; corporations gent, including one fo |
| | ■ No | s. List all payments to an insider. | | | | | | | |
| | Insider | 's Name and Address | Da | tes of payment | Total amount paid | Amount still | you | Reason for | this payment |
| i | nsider? | 1 year before you filed for bankrup? Payments on debts guaranteed or co | - | | yments or transfer | any propert | y on a | ccount of a de | bt that benefited an |
| ĺ | ■ No | | | | | | | | |
| | | s. List all payments to an insider 's Name and Address | Da | tes of payment | Total amount | Amount | - | | this payment |
| | | | | | paid | still | owe | Include credi | tor's name |
| Part | 4: Id | lentify Legal Actions, Repossessic | ons, ar | nd Foreclosures | | | | | |
| I | _ist all s modifica ■ No | year before you filed for bankrup, uch matters, including personal injurations, and contract disputes. Fill in the details. | | | | | | | |
| | Case ti Case n | | Na | ture of the case | Court or agency | y | | Status of the | e case |
| | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. | | | | | | | | |
| | _ | . Go to line 11. s. Fill in the information below. | | | | | | | |
| | Creditor Name and Address | | De | scribe the Property | | | Date | | Value of the |
| | | | Ex | plain what happene | ed | | | | property |
| | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No | | | | | | | | |
| İ | _ | s. Fill in the details. | | | | | | | |
| | Credito | or Name and Address | De | scribe the action th | e creditor took | | Date : | action was | Amount |
| | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | | | | | | | | |
| | ■ No □ Yes | | | | | | | | |
| Part | 5: Li | ist Certain Gifts and Contributions | i | | | | | | |
| 13. \ | Within 2 ■ No | 2 years before you filed for bankru | ptcy, (| did you give any gif | ts with a total value | e of more th | an \$60 | 0 per person? | |
| ı | ☐ Yes | s. Fill in the details for each gift. | | | | | | | |
| | Gifts w per per | rith a total value of more than \$600 rson | | Describe the gifts | | | Dates the gi | you gave ifts | Value |
| | Person Addres | n to Whom You Gave the Gift and ess: | | | | | | | |

Case 17-82350 Doc 1 Filed 10/06/17 Entered 10/06/17 22:22:46 Desc Main Page 38 of 51 Document Debtor 1 Benjamin K. Newman Debtor 2 Tabitha N. Newman Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Office of Timothy Brown 10/04/2017 \$1,050.00 1520 Carlemont Drive Suite M Crystal Lake, IL 60014 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Benjamin K. Newman
Debtor 2 Tabitha N. Newman

Case number (if known)

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) | | | | | | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------|------------------------------------------------------|-----------------------------------------------|--|--|--|--|
| | No Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | Description and va | lue of the pro | perty trans | sferred | Date Transfer was | | | | |
| Dэ | rt 8: List of Certain Financial Accounts, Insti | ruments Safe Denosit F | Bovee and St | orage Unit | e. | | | | | |
| | | • | | • | | | | | | |
| 20. | sold, moved, or transferred? Include checking, savings, money market, or | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage | | | | | | | | |
| | houses, pension funds, cooperatives, associa | ations, and other financ | iai institution | 15. | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | | • | Type of acco instrument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for b | oankruptcy, a | ny safe de | posit box or other deposi | tory for securities, | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, Stre State and ZIP Code) | | Describe | the contents | Do you still have it? | | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | | |
| | _ | , | | , | , | , . | | | | |
| | No | | | | | | | | | |
| | Yes. Fill in the details. | Who else has or ha | d access | Docaribo | the contents | Do you still | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | to it? Address (Number, Streets and ZIP Code) | | Describe | the contents | Do you still have it? | | | | |
| Pa | rt 9: Identify Property You Hold or Control fo | or Someone Else | | | | | | | | |
| 23. | Do you hold or control any property that som for someone. | eone else owns? Includ | de any proper | ty you bor | rowed from, are storing fo | or, or hold in trust | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prope (Number, Street, City, Sta | | Describe | the property | Value | | | | |
| Pa | rt 10: Give Details About Environmental Infor | Code) | | | | | | | | |
| | the purpose of Part 10, the following definition | | | | | | | | | |
| | | | | | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s | e air, land, soil, surface | water, ground | | | | | | | |
| | Site means any location, facility, or property a to own, operate, or utilize it, including dispos | _ | nvironmental | law, wheth | er you now own, operate | , or utilize it or used | | | | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, o | | s a hazardous | waste, ha | zardous substance, toxic | substance, | | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Benjamin K. Newman
Debtor 2 Tabitha N. Newman

Case number (if known)

| 24. | Has | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------|----------------------------------------------------------|--------------------|--|--|
| | | Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice | | |
| 25. | Hav | re you notified any governmental unit of | , | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice | | |
| 26. | Hav | re you been a party in any judicial or adm | ninistrative proceeding under any en | viron | mental law? Include settlements a | nd orders. | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or 0 | Connections to Any Business | | | | | |
| 27. | Wit | hin 4 years before you filed for bankrupto | cy, did you own a business or have a | any o | f the following connections to any | business? | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing exe | ecutive of a corporation | | | | | |
| | | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | |
| | | No. None of the above applies. Go to P | art 12. | | | | | |
| | | Yes. Check all that apply above and fill | | SS. | | | | |
| | Bu | siness Name | Describe the nature of the business | | Employer Identification number | | | |
| | Address (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | | Do not include Social Security n Dates business existed | umber or ITIN. | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | |
| | | No Yes. Fill in the details below. | | | | | | |
| | Ad | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | | | |
| | , | | | | | | | |

Entered 10/06/17 22:22:46 Case 17-82350 Doc 1 Filed 10/06/17 Document Page 41 of 51 Benjamin K. Newman Tabitha N. Newman Debtor 2 Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Benjamin K. Newman /s/ Tabitha N. Newman Benjamin K. Newman Tabitha N. Newman Signature of Debtor 1 Signature of Debtor 2 Date October 6, 2017 **Date** October 6, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Desc Main

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| Fill in this inform | nation to identify your ca | ase: | | |
|--------------------------------------|----------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| Debtor 1 | Benjamin K. Newm | an | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tabitha N. Newman | า | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official For | | for Indiv | iduals Filing Under Chap | oter 7 12/15 |
| | vidual filing under chapt claims secured by you | , , | out this form if: | |
| you have lease You must file this | ed personal property an form with the court wit ver is earlier, unless the | d the lease has no hin 30 days after y | ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to | |
| | ople are filing together i d date the form. | n a joint case, bot | th are equally responsible for supplying correc | et information. Both debtors must |
| | nd accurate as possible our name and case numl | | needed, attach a separate sheet to this form. | On the top of any additional pages, |
| Part 1: List Yo | ur Creditors Who Have | Secured Claims | | |
| For any creditorinformation be | | t 1 of Schedule D: | Creditors Who Have Claims Secured by Propo | erty (Official Form 106D), fill in the |
| | ditor and the property tha | at is collateral | What do you intend to do with the property t secures a debt? | hat Did you claim the property as exempt on Schedule C? |
| Creditor's Fr | anklin American Mtg | 1 | ☐ Surrender the property. | □No |
| | 5347 Lansbury Circ | e Lake in | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | the Hills, IL 60156 N | | Retain the property and [explain]: | |
| securing debt. | • | | Retain and pay | |
| For any unexpire in the information | n below. Do not list real | se that you listed i | in Schedule G: Executory Contracts and Unex expired leases are leases that are still in effect he trustee does not assume it. 11 U.S.C. § 365(| ; the lease period has not yet ended. |
| Describe vour u | nexpired personal prope | erty leases | | Will the lease be assumed? |
| | | | | |
| Lessor's name: | | | | □ No |
| Description of lea Property: | sed | | | ☐ Yes |
| Lessor's name: Description of lea | bas | | | □ No |
| Property: | o c u | | | ☐ Yes |
| Lessor's name: | | | | |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

page 1

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| | ebtor 1 Benjamin K. Newman ebtor 2 Tabitha N. Newman | Case number (if known) |
|-------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| D 0. | Tubilia II. II. III. | |
| | escription of leased operty: | □ No |
| | | ☐ Yes |
| | essor's name: | □ No |
| | escription of leased operty: | ☐ Yes |
| | essor's name: | □ No |
| | operty: | ☐ Yes |
| | essor's name: | □ No |
| | escription of leased operty: | ☐ Yes |
| | essor's name: | □ No |
| | escription of leased operty: | ☐ Yes |
| Par | art 3: Sign Below | |
| | der penalty of perjury, I declare that I have indicated my intention abou operty that is subject to an unexpired lease. | t any property of my estate that secures a debt and any personal |
| X | | /s/ Tabitha N. Newman |
| | Benjamin K. Newman Signature of Debtor 1 | Tabitha N. Newman Signature of Debtor 2 |
| | Date October 6, 2017 | ote October 6, 2017 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82350 Doc 1 Filed 10/06/17 Entered 10/06/17 22:22:46 Desc Main Document Page 48 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In | Benjamin K. Newman Tabitha N. Newman | | Case No. | | | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMPEN | ISATION OF ATTOI | RNEY FOR DE | CBTOR(S) | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | b), I certify that I am the attorn g of the petition in bankruptcy. | ney for the above names or agreed to be paid | ed debtor(s) and that to me, for services rendered or to | | | |
| | For legal services, I have agreed to accept | | \$ | 1,050.00 | | | |
| | Prior to the filing of this statement I have received | | \$ | 1,050.00 | | | |
| | Balance Due | | | 0.00 | | | |
| 2. | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are meml | pers and associates of my law firm | | | |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name | | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to regreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour | ment of affairs and plan which rs and confirmation hearing, an educe to market value; exc as as needed; preparation | n may be required; and any adjourned hear emption planning; | rings thereof; | | | |
| 6. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding. | does not include the following chargeability actions, judi | g service: cial lien avoidance | es, relief from stay actions or | | | |
| | | CERTIFICATION | | | | | |
| thi | I certify that the foregoing is a complete statement of any s bankruptcy proceeding. | agreement or arrangement for | payment to me for re | epresentation of the debtor(s) in | | | |
| | October 6, 2017 | /s/ Timothy Brow | n | | | | |
| | Date | Timothy Brown Signature of Attorne Law Office of Tin 1520 Carlemont I Crystal Lake, IL 6 815-455-9529 Fa tbrown@tbrownl | nothy Brown Drive, Suite M 60014 x: 815-893-7606 | | | | |
| | | Name of law firm | | | | | |

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United States Bankruptcy Court Northern District of Illinois

| In re | Benjamin K. Newman Tabitha N. Newman | | Case No. | |
|-------|----------------------------------------------|-------------------------------|---------------|----|
| | | Debtor(s) | Chapter 7 | |
| | VER | IFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 13 |
| | The above-named Debtor(s) h (our) knowledge. | tors is true and correct to t | he best of my | |
| Date: | October 6, 2017 | /s/ Benjamin K. Newman | | |
| | | Benjamin K. Newman | | |
| | | Signature of Debtor | | |
| Date: | October 6, 2017 | /s/ Tabitha N. Newman | | |
| | | Tabitha N. Newman | | |
| | | Signature of Debtor | | |

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Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Franklin American Mtg/501 Corporate Centre Dr Franklin, TN 37067

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